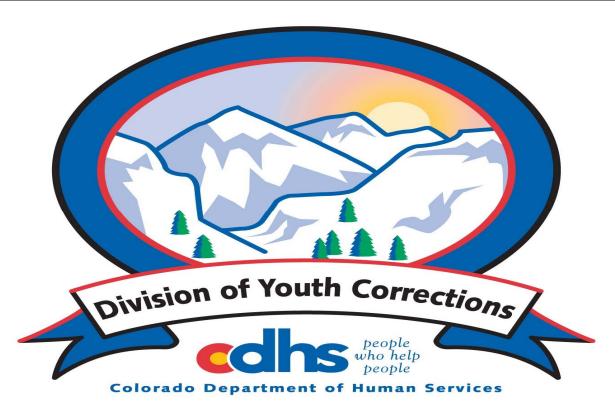


# COLORADO DEPARTMENT OF HUMAN SERVICES DIVISION OF YOUTH CORRECTIONS



# REGIONAL AUDIT STANDARDS

Working with Colorado Communities to Achieve Justice
Division of Youth Corrections

Working with Programs to Raise the Standard of Care
Office of Quality Assurance

**REVISED JULY 2010** 

# **REGIONAL STANDARDS FISCAL YEAR 2010/11**

# **General Administration**

# RGA 1.0: W=4

Within the context of the Division of Youth Correction's "Vision", "Mission Statement", and "Master Goals" each Regional Office will develop goals and measurable objectives appropriate to its purpose AND ALIGNED TO THE 5 KEY STRATEGIES. The goals and objectives will be reviewed annually and updated as necessary. All regional staff will have an understanding of the goals.

- A. Review of goals.
- B. Interview staff.

# **Fiscal Management**

# RFM 2.0: W=3

Policy and procedures practice will cover at a minimum:

- Internal controls to assure balancing.
- Petty cash is appropriately spent, TRACKED AND DOCUMENTED.
- Signature control for purchase orders.
- Budget revisions are made.
- Gift cards are signed for, receipts present and balance.
- Procurement card has appropriate expenditures, statements signed by authorized person, audit responses are timely.

# **AUDIT MEASURES:**

- A. Review of procurement card.
- B. Review of gift cards.
- C. Review of petty cash.
- D. Review of budget.
- E. REVIEW (CDHS) STATE AUDIT RESULTS.

#### RFM 3.0: *W=4*

Quarterly monitoring will be conducted for non-residential parole services for all parolees receiving such services in each region.

# **AUDIT MEASURES:**

- A. Review of non-residential monitoring reports.
- B. Tracking system assuring all services billed have been provided.

# RFM 4.0: *W=4*

Contract files include signed billing forms, current insurance and current contract.

#### **AUDIT MEASURE:**

A. Review of contract files.

# **Human Resources**

# RHR 1.0: *W=2*

Copies of the Division of Youth Corrections' Policy Manual and specific Regional Implementing Procedures will be made available and accessible. All staff will sign a statement acknowledging access to the personnel policies and regulations and his/her own responsibility for being aware of the contents.

## **AUDIT MEASURES:**

- A. Availability of current copies of the personnel policy and procedure manuals.
- B. Signed acknowledgements of policies and APPLICABLE implementing procedure manuals.

#### RHR 2.0: W=4

The Regional Office shall maintain a current, accurate, confidential personnel record for all staff. Records shall be kept in a locked file. Each file shall contain an emergency contact sheet and signed confidentiality statement.

#### **AUDIT MEASURE:**

A. Staff personnel files.

#### RHR 3.0: *W=3*

An annual written performance plan, review and evaluation of all staff will be conducted. The review will be based on defined criteria and the results discussed with the staff.

# **AUDIT MEASURE:**

A. Copies of performance evaluations with appropriate signatures in personnel files.

#### RHR 5.0: W=2

A staff shall be assigned who is responsible for operating a citizen involvement, intern, and volunteer service program for the benefit of juveniles, or office business functions.

#### **AUDIT MEASURE:**

A. Name of assigned staff.

#### RHR 6.0: **W=4**

There will be specifics to define the background screening, lines of authority, responsibility, and accountability for the Region's interns, citizen involvement, and volunteer services program.

- A. Interview with assigned staff.
- B. Review files for applications and agreements.

#### RHR 7.0: *W=2*

There will be an official registration and identification system for interns, volunteers, and consultants.

#### **AUDIT MEASURES:**

- A. Badge assignments for regular volunteers.
- B. Logs for occasional volunteers.

# RHR 8.0: *W=3*

Interns and volunteers may perform professional services only when they are certified or licensed to do so.

#### **AUDIT MEASURE:**

A. Copies of volunteers' certificates and licenses such as Certified Addictions Counselor certification.

## RHR 9.0: W=3

Interns and volunteers will complete appropriate documented orientation and/or training program prior to assignment.

# **AUDIT MEASURES:**

- A. Volunteer training records.
- B. Intern training records.

#### RHR 10.0: *W=3*

Interns, volunteers, and consultants will agree in writing to abide by the Regional policies AND PROCEDURES, particularly those relating to the security and confidentiality of information. Signed acknowledgements of policy and procedure, PREA and confidentiality shall be completed by all volunteers working in the Region.

#### **AUDIT MEASURE:**

A. Signed acknowledgements of policy and procedure, PREA and confidentiality in the files for interns and volunteers working in the Region.

# **Training and Staff Development**

#### **AUDIT MEASURES FOR RTS 3.0, 4.0, 5.0, 6.0, 7.0, AND 8.0:**

- A. To be in compliance, at least 90% of staff must meet applicable training standards and annual requirements as outlined in the Division of Youth Corrections' Policy 4.2. This shall be documented in staff training records (In the Colorado Trails database, where available).
- B. Hard copy files must be provided to support Trails database including training attendance sheets.

#### RTS 1.0: *W=3*

The Regional staff development and training program will be planned and coordinated by a staff who assures that any regional staff member who delivers training on-site will be qualified and certified as a trainer in the area in which he/she is presenting. The training plan will be reviewed annually.

#### **AUDIT MEASURES:**

- A. Name(s) of assigned staff.
- B. Trainer certificate(s).
- C. Compliance with Division of Youth Corrections' Policy 4.2 requirements.

#### RTS 2.0: W=3

The Regional training plan will be developed, evaluated, and updated based on an annual assessment that identifies current job-related training needs AND STATEWIDE INITIATIVES.

#### **AUDIT MEASURE:**

A. A copy of the current annual training plan.

#### RTS 3.0: *W=4*

Newly hired Division of Youth Corrections' personnel who provide services to juveniles shall receive 110 hours for Client Managers for their first year of employment. The academy subjects must be completed within 60 days of their employment starting date.

#### RTS 4.0: W=4

The above listed job group will receive 40 hours of annual training each subsequent year of employment to include at a minimum the Division of Youth Corrections' Policy 4.2 listed annual trainings and other subjects as determined through their PMAP.

#### RTS 5.0: W=3

Newly hired Division of Youth Corrections' personnel who have minimal/no juvenile contact shall receive 80 hours of training their first year of employment. The academy subjects must be completed within 60 days of their employment starting date.

#### RTS 6.0: W=2

The above listed job group will receive 16 hours of annual training each subsequent year of employment to include at a minimum the Division of Youth Corrections' Policy 4.2 listed annual trainings and other subjects as determined through their PMAP.

#### RTS 7.0: *W=4*

Newly hired Division of Youth Corrections' Administrative/Management personnel shall receive 72 hours of training their first year of employment. The academy subjects must be completed within 90 days of their employment starting date.

#### RTS 8.0: *W=4*

The above listed job group will receive 40 hours of annual training each subsequent year of employment to include at a minimum the Division of Youth Corrections' Policy 4.2 listed annual trainings and other subjects as determined through their PMAP.

#### RTS 9.0: *W=3*

Personnel that directly supervise subordinate staff complete training in the following subjects within the first 12 months of their supervisory assignment:

- Equity Subjects
- PMAP (Performance Management and Pay) Training
- Preventing Sexual Harassment in the Workplace for Supervisors
- Preventing Workplace Violence for Supervisors
- Responding to Substance Abuse in the Workplace for Supervisors
- Supervisory Training

# **AUDIT MEASURE:**

A. To be in compliance, at least 90% of supervisors must meet applicable training standards. This shall be documented in staff Colorado Trails database training records functionality.

# **Safety and Emergency Procedures**

#### RSE 2.0: *W=4*

The office will conform to applicable federal, state, and/or local fire safety codes. Compliance is documented by the authority having jurisdiction. A fire alarm and automatic detection system will be required, as approved by the authority having jurisdiction, or there will be a plan for addressing these or other deficiencies within a reasonable time period. The authority will approve any variances, exceptions, or equivalencies that do not constitute a serious life safety threat to the occupants of the facility.

#### **AUDIT MEASURE:**

A. Copies of inspections.

#### RSE 3.0: *W=4*

The office's fire prevention regulations and practices will include, but are not limited to, the following:

- Provision for an adequate fire protection service.
- A system of fire inspection and testing of equipment at least quarterly or at intervals approved by the authority having jurisdiction, following the procedures stated for variances, exceptions, or equivalencies.
- An inspection within the previous 24 months by local or state officials or other qualified person(s).
- Availability of fire protection equipment at appropriate locations throughout the facility.

#### **AUDIT MEASURE:**

A. Copies of all inspections, showing compliance.

#### RSE 4.0: *W=4*

There will be a quarterly fire and safety inspection of the office, at no less than 75% by a qualified office staff. This policy and procedure will be reviewed and updated as necessary.

#### **AUDIT MEASURES:**

- A. Documentation of qualifications of staff fire and safety inspector.
- B. Documentation of quarterly inspections showing 75% compliance.

#### RSE 5.0: W=3

Offices will be equipped with non-combustible receptacles for smoking materials outside the buildings.

#### **AUDIT MEASURE:**

A. Visual observation.

#### RSE 7.0: W=4

The office will have a written evacuation plan prepared in the event of fire or major emergency that is certified by a qualified inspector trained in the application of appropriate codes. The plan will be reviewed annually, updated as needed, and reissued to the local fire jurisdiction. The plan will include the following:

- Location of building/room floor plan.
- Use of exit signs and directional arrows for traffic flow.
- Location of publicly posted plan.
- Annual emergency drills.

#### **AUDIT MEASURE:**

A. Certified current plan.

# RSE 8.0: *W=2*

The office promotes a positive, safe, and sanitary environment with all mechanical, plumbing, electrical, and aesthetic systems in proper working order.

# **AUDIT MEASURES:**

- A. Test of systems.
- B. Visual observation.

# RSE 9.0: *W=3*

All doors and hallways are kept free from obstruction.

#### **AUDIT MEASURE:**

A. Visual observation.

# RSE 10.0: *W=3*

The office environment shall be kept sanitary and all furniture and equipment in good condition.

# **AUDIT MEASURE:**

A. Visual observation.

# RSE 11.0: *W=3*

First aid kit(s) will be available in the office and in the vehicles used by the Regional Office.

- A. Documentation regarding location, contents, and periodic inspection of first aid kits.
- B. Inspection of first-aid kit(s).

# **Security and Control**

# RSC 1.0: *W=3*

There will be specifics to govern the availability, control, and use of security devices and specify the level of authority required for their access and use, such as cuffs and shackles.

# **AUDIT MEASURES:**

- A. Inventory of security devices with location.
- B. Sign out and sign-in log for security devices.

#### RSC 2.0: *W=3*

All Critical Incidents within Regional Office responsibility are to be reported in the Colorado Trails database dated and signed by the staff reporting the incident. The report is reviewed and locked in the Colorado Trails database by the Regional Director or designee.

#### **AUDIT MEASURE:**

A. Incident Reports/Critical Incident Reports documented in the Colorado Trails database.

#### RSC 4.0: W=2

There will be specific policies AND PROCEDURES to govern the use and security of vehicles.

#### **AUDIT MEASURES:**

- A. Review of vehicle use logs.
- B. Copy of current procedures.

#### RSC 6.0: *W=2*

Regional Offices should monitor the entrance and exit of VISITORS.

#### **AUDIT MEASURES:**

- A. Written procedures.
- B. Demonstration of system.

#### RSC 7.0: W=4

Implementing procedures will be in place addressing safety protocol when in the community, signing out and location of Client Managers, cell phone availability.

#### **AUDIT MEASURE:**

A. Review of procedure.

#### RSC 8.0: W=4

All safety protocol is followed in the office, such as locked doors, securing keys, etc.

#### **AUDIT MEASURE:**

A. Visual observation.

# **CASE MANAGEMENT SERVICES**

# RCS 1.0: *W=2*

In the event of a traumatic incident (such as, a suicide attempt or injury resulting in severe traumatic injury to staff or juveniles) a trained professional or agency (from outside the REGION) will be asked to provide critical de-briefing to help AFFECTED PARTIES as necessary. The best time period for this de-briefing is no more than 72 hours after the incident.

#### **AUDIT MEASURES:**

- A. Review of Regional Office procedures.
- B. Review of Critical Incident reports and any documentation related to de-briefings.
- C. Interviews with staff and juveniles.

#### RCS 2.0: *W=3*

A Discrete Case Plan (DCP) is designed and updated within the timeframe of the policy for each juvenile that includes measurable criteria of expected behavior and accomplishments BASED ON CJRA AND OTHER ASSESSMENT RESULTS. A time schedule for achievement IS INCLUDED. The DCP is designed by the Client Manager and the multi-disciplinary team, and includes signatures. A copy of the DCP shall be placed in the juvenile's file AND input into the Colorado Trails database.

#### **AUDIT MEASURES:**

- A. Review of files.
- B. Review of Trails.

#### RCS 4.0: *W=3*

Regional Office supervisors shall utilize the Colorado Trails database quality control reports to conduct quarterly reviews of Client Manager/Parole Officers' caseload documentation.

#### **AUDIT MEASURE:**

A. Review of the Regional Office supervisor's quarterly quality control Colorado Trails reports.

#### RCS 5.0: W=4

The Client Manager/Parole Officer shall form a Multi-Disciplinary Team (MDT) for juveniles on their caseload. THE MDT SHALL MEET ONCE PER QUARTER.

- A. Review of juvenile's Individual Treatment Plan (ITP)/Discrete Case Plan (DCP).
- B. Review of monthly DCP summaries.

#### RCS 7.0: W=3

The Client Manager shall review the DCP monthly, completing information in Colorado Trails. INFORMATION PLACED IN TRAILS shall include progress, changes to services, TRANSITION, changes to placement, safety of the juvenile ETC.

#### **AUDIT MEASURES:**

A. Review of Colorado Trails database.

## RCS 8.0: *W=3*

Each juvenile shall have a current Colorado Juvenile Risk Assessment (CJRA), which is updated at CHANGE OF PLACEMENT, PRIOR TO PAROLE, CRB, DISCHARGE, AND AT KEY DECISION POINTS.

#### **AUDIT MEASURE:**

A. Review of CJRA.

#### RCS 9.0: *W=3*

All extensions or changes to length of service is approved by the Client Manager's supervisor AND PLACED IN TRAILS.

#### **AUDIT MEASURES:**

- A. Review of TRAILS.
- B. REVIEW OF SUPERVISOR'S NOTES/APPROVAL.

#### RCS 10.0: *W=3*

Documentation in juvenile's file and Trails demonstrates involvement of the family, or efforts made by the Client Manager encouraging involvement OF BOTH PARENTS.

#### **AUDIT MEASURES:**

- A. Review of files.
- B. Review of Colorado Trails database.

#### RCS 11.0: W=4

Specific policy and procedures require the reporting of all instances of child abuse and/or neglect consistent with appropriate state or local laws.

#### **AUDIT MEASURE:**

A. Critical Incident and Incident Reports documented in the Colorado Trails database.

# **General Programs**

# RGP 1.0: W=2

The Division of Youth Corrections' Restorative Community Justice (RCJ) regional standard philosophy is based on values and principles, which guide its actions in response to crime, victim needs, and offender accountability. An RCJ program promotes offender accountability to victims and communities while helping to restore public safety. Restorative Community Justice Values and principles are integrated into the overall Regional philosophy.

# **AUDIT MEASURES:**

- A. RCJ PROJECTS, DOCUMENTATION.
- B. REGIONAL RCJ GOALS.
- C. LOCAL COMMUNITY INVOLVEMENT.

#### RGP 2.0: *W=4*

Each Division of Youth Correction's Regional Office shall establish a Victim Notification Program to ensure proper identification of and notification to victims of committed juveniles in accordance with the Colorado Victim Rights Act (C.R.S. 24-4.1-301 through 304) and the Division of Youth Corrections' Policy 1.12.

#### **AUDIT MEASURE:**

A. Review of regional implementing procedures.

#### RGP 2.1: *W=3*

The confidentiality of any identifying information regarding victims shall be securely maintained.

#### **AUDIT MEASURE:**

A. Victim notification program files.

#### RGP 2.2: *W=3*

Client Managers shall be responsible for notification to the Regional Victim Notification Coordinator of critical stages identified in C.R.S. 24-4.1-301 through 304 and Division of Youth Corrections' Policy 1.12. This includes movements and status changes of the juvenile in accordance with the time frames identified by Division of Youth Corrections' Policy 1.12. Notification to the Regional Victim Notification Coordinator must be in writing either by fax or e-mail and will be maintained in the VNP file.

- A. Review of Division of Youth Corrections' Policy 1.12.
- B. Review of regional implementing procedures.
- C. Review of victim notification program files.
- D. Review of victim notification tracking sheet.

#### RGP 2.3: *W=3*

The Regional Victim Notification Coordinator shall send all identified victim(s) an enrollment packet within thirty (30) days of a juvenile entering assessment. If the victim chooses to enroll in the victim notification program, the victim shall receive subsequent notification regarding critical stages identified in C.R.S. 24-4.1-301 through 304 and Division of Youth Corrections' Policy 1.12 including hearings, movements and status changes of the juvenile. Notifications to victims shall be made within 24 hours of receipt of the notification from a Client Manager, excluding weekends and holidays.

#### **AUDIT MEASURES:**

- A. Review of Division of Youth Corrections' Policy 1.12.
- B. Review of regional implementing procedures.
- C. Review of Colorado Trails database letter history.
- D. Review of victim file.
- E. Review of victim notification tracking sheet.

#### RGP 2.4: *W=3*

Victims shall be notified immediately of any escape, and notified as soon as possible of any return from escape.

#### **AUDIT MEASURES:**

- A. Review of Division of Youth Corrections' Policy 1.12.
- B. Review of regional implementing procedures.
- C. Review of victim file.
- D. Review of VOICE/VINE system.
- E. Review of Colorado Trails database letter history.
- F. Review of victim notification tracking sheet.

#### RGP 4.0: *W=4*

Juveniles moved to a more secure setting are afforded due process within the timeframe noted in policy.

#### **AUDIT MEASURES:**

- A. Review of Colorado Trails database.
- B. Review of file.

#### RGP 5.0: *W=4*

Residential contract facilities are monitored within the required timeframes. Immediate actions and action items are addressed appropriately.

- A. Interview with assigned staff.
- B. Review of monitoring documents.

# **Juvenile Records**

# RRC 1.0: *W=3*

The Regional Office maintains a record on each juvenile; the contents of the hardcopy records are identified and separated according to an established format. The master file should include at a minimum the following information:

- FACE SHEET.
- MITTIMUS.
- CRITICAL INFORMATION ADVISEMENT FORMS.
- INDIVIDUAL TREATMENT PLAN.
- MONTHLY DISCRETE CASE PLAN REVIEWS.
- SIGNED RELEASE OF INFORMATION FORMS, WHEN APPLICABLE.
- SIGNED CONFIDENTIALITY ACKNOWLEDGEMENT FOR DRUG AND ALCOHOL INFORMATION.
- HEALTH SCREEN.
- DRIVER'S LICENSE NUMBER, Social Security, and Medicaid numbers, if applicable.
- Court and disposition INFORMATION.
- CURRENT JUVENILE Discrete Case Plan (DCP).
- SIGNED MEDICAL CONSENT FORMS.
- Progress reports FROM CURRENT FACILITY.
- Individual Education Plan (IEP), WHEN APPLICABLE.
- Final discharge or transfer report.
- Colorado Juvenile Risk Assessment.
- Education transcripts OR OTHER PERTINENT EDUCATIONAL INFORMATION.

## **AUDIT MEASURES:**

- A. Review of juvenile's file.
- B. Review of the Colorado Trails database.
- C. Transfer records.

#### RRC 2.0: *W=2*

Regional Offices shall maintain a log identifying all juvenile records that have been transferred to the Division's closed records unit. The log at a minimum must contain:

- The juvenile's name.
- The date the file was sent to closed records.
- DISCHARGE DATE.

# **AUDIT MEASURES:**

- A. Review of Region's transmittal log.
- B. Review of discharge summary in Colorado Trails database.
- C. Review of the closed records office receipt log.

#### RRC 3.0: *W=4*

Juvenile files are kept secure.

#### **AUDIT MEASURE:**

A. Visual observation.

#### RRC 4.0: *W=3*

Client Managers complete all filing in a timely manner, not to exceed 60 days.

#### **AUDIT MEASURES:**

- A. Visual observation.
- B. Review of files.

# Release/Reintegration

#### RRL 1.0: *W=3*

Specific policy and procedures will provide that all juveniles have a plan to transition. 90 DAYS PRIOR TO RELEASE, THE TRANSITION PLAN NEEDS TO BE REVIEWED MONTHLY.

# **AUDIT MEASURES:**

- A. Review of the DCP and monthly reviews.
- B. Review of parole plan.

#### RRL 2.0: *W=4*

Client Managers shall ensure that all of their caseload is paroled no later than the authorized mandatory parole dates.

- Proper notification is made to the courts for aggravated offenders.
- Review of the Colorado Trails mandatory parole start date report.

#### **AUDIT MEASURES:**

- A. Colorado Trails database review parole functionality.
- B. Review of aggravated offenders Discrete Case Plan (DCP).

## RRL 3.0: W=3

Regional offices shall develop a standardized tracking system to identify those parolees that are required to pay restitution, the number of parolees that have made payments by month and the amount of restitution paid by each parolee.

# **AUDIT MEASURES:**

- A. Review of the tracking system.
- B. Review the Discrete Case Plan (DCP)/ Parole Plan monthly review.
- C. Review of Restitution Key Performance Indicator data.

#### RRL 4.0: *W=4*

Client Managers shall ensure POLICY 16.11 IS FOLLOWED FOR ALL juveniles on their caseload who are required to register as a sex offender.

#### **AUDIT MEASURES:**

- A. Review of Colorado Trails.
- B. Review copy of notice to register as a sex offender registration form.
- C. Review of DCP monthly review.
- D. Review of discharge summary.

#### RRL 5.0: W=4

Client Managers shall ensure the correct discharge date is documented in Trails.

# **AUDIT MEASURE:**

A. Review of Colorado Trails database.

# RRL 6.0: *W=3*

Levels of parole supervision are approved by the Client Manager's supervisor and match the number of contacts.

# **AUDIT MEASURES:**

- A. Review of file.
- B. Review of supervisor notes.

# RRL 7.0: *W=3*

The parole plan reflects current information and all services are approved by the Client Manager's supervisor or designee.

- A. Review of file.
- B. Interview with Client Manager.
- C. Interview with Client Manager's supervisor.

# **REGIONAL OFFICE OPERATIONS**

#### ROO 1.0: *W=3*

The Region holds monthly staff meetings.

#### **AUDIT MEASURE:**

A. Review of meeting minutes.

## ROO 2.0: *W=3*

The Region meets with contract providers (residential and non-residential) at least twice per year. Minutes of the meetings are kept.

# **AUDIT MEASURE:**

A. Review of meeting minutes.

#### ROO 3.0: *W=3*

The Region surveys juveniles and families at least once per year to measure satisfaction. Problem trends are addressed.

# **AUDIT MEASURE:**

A. Review of surveys and outcomes.

## ROO 4.0: *W=4*

All HIPAA regulations are followed.

# **AUDIT MEASURES:**

- A. Visual observation.
- B. Interview with staff.

# ROO 5.0: *W=3*

The Region has programs in place that addresses staff morale and offers incentives.

## **AUDIT MEASURES:**

- A. Review of programs.
- B. Interview with staff.

#### ROO 6.0: W=4

The Regions ARD-ALJ quarterly reports meet at minimum 85% of the requirements.

#### **AUDIT MEASURE:**

A. Review of reports.

#### ROO 7.0: W=3

Documentation is available that verifies expenditures through inter-agency agreement with judicial and are reviewed by the Regional Director.

# **AUDIT MEASURES:**

- A. Review of expenditures.
- B. INTER-AGENCY EXPENDITURE REPORT IS SIGNED.
- C. IA AGREEMENT IN FILE.

#### ROO 8.0: *W=3*

Documentation is available verifying the Regional Office ensures local juvenile service planning committees are reviewing monthly expenditures.

#### **AUDIT MEASURE:**

A. Review of documentation.

## ROO 9.0: *W=3*

Regional Office reviews expenditures to ensure they conform to the district's plan.

#### **AUDIT MEASURE:**

A. Review of documentation.

## ROO 10.0: W=3

Documentation exists verifying that juvenile services planning committees receive and review year-end provider reports.

# **AUDIT MEASURE:**

A. Review of documentation.

#### ROO 12.0: W=4

THE REGION REVIEWS AND ADDRESSES NOTED ARD DEFICIENCIES.

- A. REVIEW OF ARD WEB-BASED REPORT.
- B. REGIONAL DIRECTOR INTERVIEW.